

Delaware Economic Development Authority Application for the Clean Energy Performance Grant Program

Instructions: This application is designed to be completed electronically, then printed, signed and notarized. Please make all efforts to complete the application electronically, although it will be accepted if completed by hand. Return one original plus twelve (12) copies, including exhibits, to The Delaware Economic Development Authority, 99 Kings Highway, Dover, DE 19901, with a check in the amount of \$250.00 made payable to the "The Delaware Economic Development Authority" (non-refundable application fee). Contact your representative directly with questions. This application is not a commitment for funds, nor does it obligate the State of Delaware or any State agency to lend any form of financial assistance.

		ral Inforn	•	iny form of financial assistance.		
Legal Name of Applicant (Business) Delaware		e Business License & Type		Tax I.D. or SS# for an Individual Request		
D/B/A (if applicable) Date Busin		ness Established (mm/yyyy)		NAICS Code ¹		
Sole General Proprietorship Partnership	Limited Partnership	S-Corp	C-Corp	LLC Individual Business Request		
Applicant's Address				Business Phone # () -		
Applicant's Principal Place of Business	(if different than abo	ve)		Applicant's Fax # () -		
Business Description				State of Incorporation		
Primary Project Contact & Phone Number		Title		Amount of Financing Requested (Not to exceed \$800,000) \$		
	Please Provide th	e Following E	mployment Da	ata:		
Presently on Site To Be Main	ntained To Be	Created	To Be F	Relocated to Delaware TOTAL		
Average Ar	nnual Wage Avera	ge Annual Wa	ge Average	e Annual Wage		
Management & Ownership (Show 100% ownership. If more space is necessary, ignore here and attach a complete list formatted like below as "Exhibit: Management & Ownership – 1") Name SS# or Tax ID# % Ownership Address (if different from applicants)						
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¹ A North American Industry Classification System (NAICS) Code is a 6 digit number assigned to your business by the Delaware Department of Labor. NAICS Codes replaced SIC codes. A NAICS code is also referred to as the Principal Business Activity or Principal Product or Service code on your federal income tax return.

Has the applica	nt or any person listed above:						
Yes No	proceeding, criminal prosecution or civ seeking relief under, state or federal sta working conditions, industrial hygiene	Been the subject of, or a party to, any formal or informal inspection, inquiry, investigation, administrative proceeding, criminal prosecution or civil litigation by any federal or state agency administering, or private person seeking relief under, state or federal statutes, regulations or rules governing collective bargaining, hours of labor, working conditions, industrial hygiene and safety, minimum wage standards, discrimination in wages, child labor,					
Yes No	Been the subject of or a party to any for proceedings, criminal prosecution or ci	unemployment insurance, workers' compensation or other labor law matters? Been the subject of or a party to any formal or informal inspection, inquiry, investigation, administrative proceedings, criminal prosecution or civil litigation by any federal or state agency administering, or private person seeking relief under, state or federal environmental statutes or regulations?					
Yes No	Been the subject of, or a party to, any f proceeding, criminal prosecution or civ administrative agency for the criminal	Been the subject of, or a party to, any formal or informal inspection, inquiry, investigation, administrative proceeding, criminal prosecution or civil litigation by any state or federal law enforcement, regulatory or administrative agency for the criminal or civil violation of any federal or state statute, regulation, rule or the terms					
Yes No		of any license or permit issued by a federal or state agency, including the failure to hold such a license or permit? Been the defendant in any civil litigation in which any type of fraud, misrepresentation, unfair or deceptive trade practices were alleged?					
Yes No	Been debarred or suspended from cont	Been debarred or suspended from contracting with any state or federal agency or from receiving financial assistance from any state or federal agency?					
Yes No		Been denied any license or permit or had any license or permit revoked or suspended by any federal, state or local					
Yes No	•						
☐ Yes ☐ No	any bankruptcy court, or been subject to any other state or federal insolvency or receivership proceedings?						
If the answer to ar			ach as: "Exhibit: Management & Ownership – 2"				
	Outsourced Management Information						
Name of accounta	nt Name of accountants' firm	Address	Telephone () -				
Name of legal cou	nsel Name of legal counsel's firm	Address	Telephone () -				
Other applicable of	onsultant Name of firm	Address	Telephone () -				
	Annlic	ant Informatio	<u> </u>				
Within the anges of	• •						
within the space p	provided below please provide a description of	or the company, specific	carry citing its clean energy products.				
Please estimate the annual aggregate wattage rating output of all end products that are produced in Delaware. Note, this amount should correspond to the "Amount of Financing Requested" on page one.							
Within the space provided below, please provide a brief description of the end products constituting this number.							

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Certifications and Notarization To Applicants

CERTIFICATION -- Eligibility for financial assistance from the Delaware Economic Development Authority is determined by the information presented in this application and in the required exhibits and attachments. Any change in the status of the proposed project from the facts presented herein could disqualify the project, including but not limited to, the commencement of construction or the acquisition of assets such as land or equipment. Please contact the staff of the Authority before taking any action which would change the status of the project as reported herein.

To the extent permitted by Delaware's Freedom of Information Act, all information contained in this application or obtained by the Authority in investigating or considering this application will be kept confidential, except for disclosure to the Council, to the staff and attorneys of the Authority and DEDO, and except for disclosures made at the public hearing of the Council and in any published notice of such hearing. If a loan is made for your project, confidentiality may also be affected by any information reporting and other requirements imposed on the Authority by the Internal Revenue Code.

I, the undersigned, being duly sworn upon my oath say:

- 1. The Applicant as listed in section 1-A is the recipient of the funds.
- 2. The Applicant hereby agrees, if this application is approved, to comply with all federal, state, and local laws affecting the grant to be issued and the operation of the proposed project. As part of this agreement, the Applicant agrees to use its best efforts in good faith to meet all employment projections set forth herein and to give the first opportunity of employment to qualified Delaware residents for all unskilled and semi-skilled workers employed by the applicant. The Applicant agrees to report to the Authority, no later than August 31 of the year following the start of its operation of the project, the total number of its unskilled and semi-skilled employees and the number of its unskilled and semi-skilled employees who were residents of Delaware at the time of their employment.
- 3. The Applicant hereby acknowledges and agrees that the Authority reserves the right to and may disclose any information contained in this application and its supporting documents to the Council on Development Finance (CDF), to the staff and attorneys of the Authority and the DEDO, at any public hearing held on this application by the CDF, in any published notice of such hearing, and that this application is subject to the Delaware Freedom of Information Act.
- 4. The Applicant hereby agrees that any officers, employees, agents or attorneys of the Authority or the Delaware Economic Development Office may have access to and copy any and all information in any form pertaining to Applicant, including, but not limited to, tax returns and information from tax returns as used in 30 Del. C. §368, in the custody of any State of Delaware, or other State, department, agency, instrumentality, division, office, board, bureau, council, commission, committee, panel or "public body," as that term is defined in the Delaware Freedom of Information Act, 29 Del. C. § 10002(a), including, but not limited to, the Departments of Finance, State, Labor, and Natural Resources and Environmental Control of the State of Delaware, the United States Environmental Protection Agency, the United States Department of Labor, the National Labor Relations Board or any other agency of the federal government having custody of information deemed pertinent by DEDO or the Authority staff or attorneys in evaluating Applicant's application for assistance.
- 5. This application, with all attachments & exhibits, is the product of diligent and reasonable investigation that I have either overseen or been personally involved.
- 6. I have carefully read this application, including all attachments and exhibits, and the information contained in this application, including all attachments and exhibits, is true, accurate and complete to the best of my information and belief.
- 7. I am a "high managerial agent" of the Applicant, as defined in Del. C. §284(b), and I am acting within the scope of my employment and in behalf of the Applicant.
- 8. I understand that if I have intentionally made a false statement in this application, or someone else has made a false statement herein that I know or believe to be false, I am subject to criminal prosecution. Further, the Authority, at its option, may terminate its financial assistance.

Name of Applicant (Business)

Signature of the Representative of the Applicant

Notary Information

State of ______ County of _____

Signed and sworn to (or affirmed) before me on: / / 20____ by _____

(Representative of Applicant, not Notary)

[SEAL]

(Name of Notary Public)

My Commission Expires: ______

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EXHIBITS REQUIRED

This application will not be considered complete unless the following items are submitted with the application form.

A. "If y	yes" or	"If Necessary"	' exhibits from application:		
= "	ached ached	□ NA □ NA	Exhibit: Management & Ownership – 1 Exhibit: Management & Ownership – 2		
B. Cer	tificate	of Good Stand	ding* and Business License:		
Att	ached	☐ In Process	An original Certificate of Good Standing issued by the Division of Corporations of the Delaware Secretary of State's office within the thirty-day period before the date of the application		
Atta	ached	☐ In Process	A copy of the business license issued by the Division of Revenue of the Delaware Department of Finance.		
* Certific	cate of Go	ood Standing is not	available for sole proprietorships or some general partnerships, but is for all other entities.		
C. Financial information:					
Atta	ached	The most recent of	financial statements for the company or its most recent annual report.		

D. Non-refundable application fee of \$250.0

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